NN OIL CONS. COMMISS.

Form 9-331 Dec. 1973

1. oil

well

below.)

AT SURFACE:

AT TOTAL DEPTH:

 \square

 NAME OF OPERATOR Exxon Corporation
 ADDRESS OF OPERATOR

gas

AT TOP PROD. INTERVAL:

REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES

well

Drawer DD
Artesia, NM 88210

AUG 1 1 1983

SUBSEQUENT REPORT OF:

5940' FSL & 560' FWL of Section

Please amend the proposed total depth from 5000' to 8500'.

DEPARTMENT OF THE INTERIOR ___
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to driff or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)

other

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE.

P O Box 1600, Midland, TX ART \$ 100 OFFICE

		m Approved. Iget Bureau No. 42-R1424			
	LEASE -46275				
6. 	IF INDIAN, ALLOTTE –	EE OR TRIBE NAME			
7. 	UNIT AGREEMENT	NAME .			
	FARM OR LEASE NA rton Flat Fed	····-			
9. 1	WELL NO.				
Undesig. Avalor Wildeat Velnus					
	AREA	BLK. AND SURVEY OR			
Se	c. 1-21S-27E				
12.	COUNTY OR PARIS	H 13. STATE			
Ede	dy	NM			
14.	API NO.				
	ELEVATIONS (SHO 07' GR	W DF, KDB, AND WD)			
(NOTE: Report results of multiple completion or zone change on Form 9-330.)					

ABANDON*
(other) Amend total depth

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

BONE OF LAND OF LAND

Subsurface Safety Valve: Manu. and Type		<u> </u>	NEW MEXICO	Ft
18. I hereby certify that the foregoing is true and correct SIGNED TITLE	Unit Head	DATE	July 15, 1983	
APPROVED BY CONDITIONS OF APPROVAL IF ANX: 1983	ederal or State office use)	_ DATE _		